

An
Inaugural Essay

Read March 10 1828

On
Hemorrhoids

For
The Degree of Doctor of Medicine

In the
University of Pennsylvania

by

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of Tennessee
August 25th 1828

1880

1844

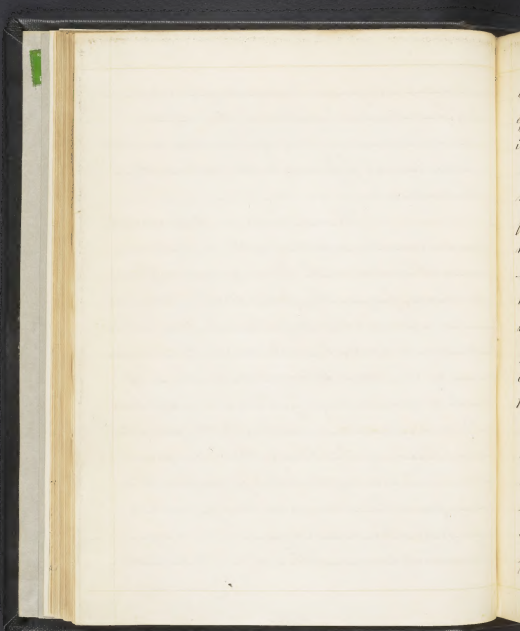
Scarcely, in the whole catalogue of diseases, to which the human frame is liable do we meet with any other, that has so little engaged the attention of pathologists, as Hemorrhoids. Though a most painful and inconvenient disease; yet owing perhaps, to its locality, it seems to be generally neglected, being considered not only loathsome and uninteresting; but passed over as simple in its nature and easily cured; not even deemed sufficiently important, to awaken a desire to narrowly investigate its true character.

To this neglect or ignorance of the physician, with regard to the true nature of the disease, may be attributed, the irremediable or terrible evils, of which Hemorrhoids are productive. Among which, may be enumerated, metastasis of the

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disease, dangerous hemorrhages, abdominal inflammation, ulceration of the rectum, painful spasms of the sphincters and the formation of fissures, in the extremity of the rectum.

Hemorrhoids or Piles consist in a diseased condition of the rectum and anus, attended with tumours and a flow of blood, frequently periodical. They are called open or blind piles, according as this effusion is present or otherwise. The meaning of the word Hemorrhoids, which is of Greek origin, is simply a discharge of blood. It seems, however, according to the general acceptance of this term, that Surgeons have implied by it, either a simple bleeding from the rectum, recurring more or less frequently, unaccompanied by any permanent tumour, within or on the outside



of the anus; or lastly, tumours produced by effused blood, which is sometimes converted into an organic substance.

This disease spans neither age nor sex. It has begun as early as at the first month of infancy; but it very seldom molests children, and may rather be considered as the disease of adults. Women, during the state of pregnancy, and just after the menses have finally left them, are peculiarly subject to hemorrhoids; at all other times, they are less troubled with them than men.

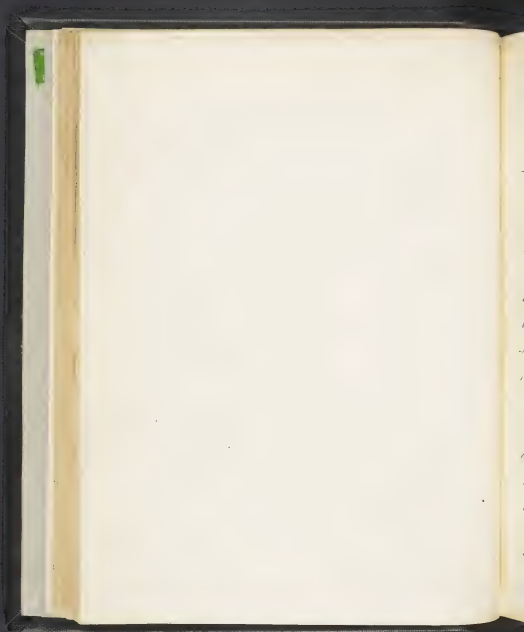
The causes of hemorrhoids, are habitual constipation, the prolonged efforts to discharge faecal matter, the lodgement of foreign bodies in the rectum, suppositories or worms, the frequent use of warm injections, the



habit of sitting, on soft cushions, the abuse of drastic purgatives, heating aliment, alcoholic liquors, the compression of the abdomen, by belts or corsets, the weight of the gravid uterus pressing on the iliac veins. Aloes, Colocynth and Rhubarb, produce, when given in large doses, a straining action of the rectum; and thereby, a great determination of blood to the hemorrhoidal vessels, and thus give rise to the formation of tumours. The sphincter muscle grasps the internal folds of the rectum, and the hemorrhoids, and thus, increases the disease. The above purgatives, are therefore dangerous, and in the order above designated. Suppositories, stimulating clysters, are for this reason, to be avoided.



Hemorrhoids, sometimes, even in a severe
 degree; but generally, their appearance
 is preceded, by pain in the bowels,
 more or less tenderness of the abdomen;
 tenesmus of the bowels; vertigo; delirium
 more or less, Stultitia, Stultitiae; rigors and
 more or less fever. The symptoms,
 indeed, are similar to those, that indi-
 cate inflammation of the lining
 membrane of the intestines. This
 disease is, besides, commonly attended
 with sensations of burning, scalding
 and pain, in the intestines, and
 around the anus. At this stage of the
 affection, a focus of pus is to be seen;
 not indicating a curability of the disease,
 but merely the existence of considerable
 inflammation. In other instances, a dis-
 charge of blood takes place, and the disease



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immediate relief, to all the symptoms.
This flow of blood takes place when
the patient is at stool. It may contin-
ue to flow some days, and has been
known to occur, daily, for months and
years. When there is no discharge of
blood, one or more Tumours, of a round
swelling appearance, of a dark violet
colour, may be observed at the margin
of the anus, and sometimes even with-
in the rectum, a tumour with more
or less inflammation.

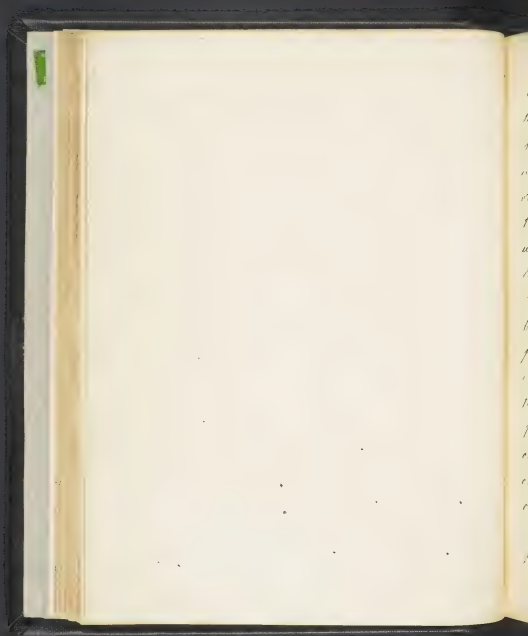
Concerning these Tumours,
there has been considerable diversity
of opinion; among Pathologists, and until
recently, their true nature was seen
imperfectly understood. It was sup-
posed, that they consisted of a varicose dilata-
tion of the hæmorrhoidal veins. But then,

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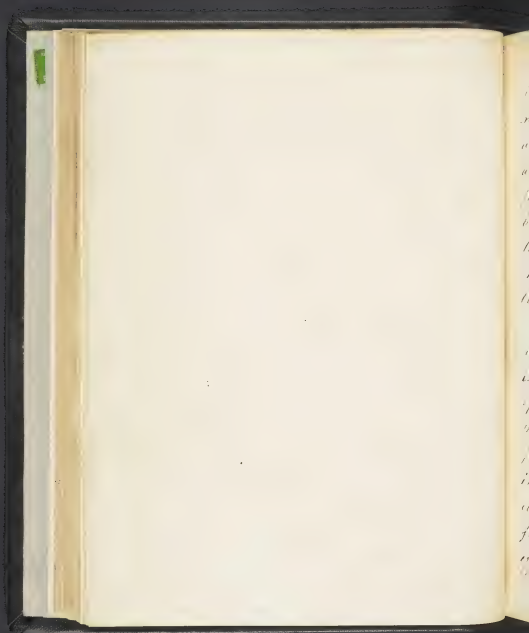
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seems to have been the first, to suggest, that
fistulae did not consist of varicose veins, but
of an effusion of blood into the cellular
tissue of the intestine, near its extremity.
This opinion was adopted by Boerhaave,
though, not until, he had perfectly
satisfied himself of its truth, by repeated
dissections. He discovered, that the blood
was contained within a delicate membra-
nous cyst, formed out of the cellular coat.
In no instance, did he discover, even
a connexion, between these tumours
and varicose veins.

Independently, of the
proof derived from dissections, it seems
evident from the enormous size, to which
these tumours sometimes attain, that
they do not consist of a varicose dilatation
of the veins. If removed by the knife, the



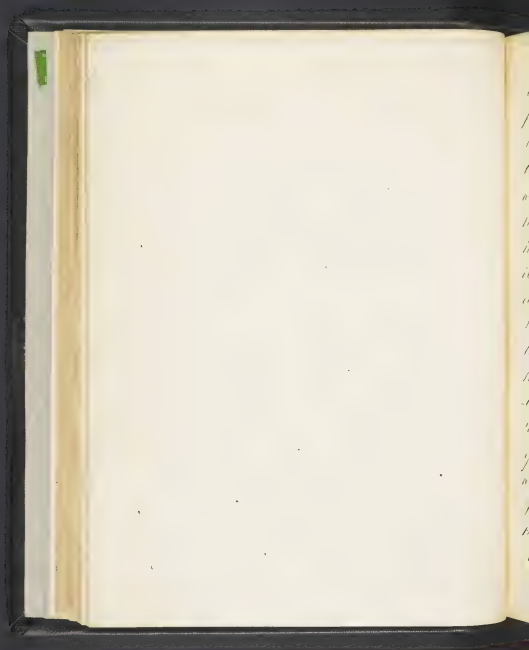
bleeding, is very inconsiderable, even when;
they are of the largest size. Schenck,
states, that he was called to a gentleman
who had some hemorrhoidal tumours,
of which, one was as large as his fist.
He extirpated them with the knife,
and his patient speedily recovered, the
loss of blood being but trifling. If the
veins were varices, there would always
be, profuse hemorrhages. After some
portion of the blood is evacuated, or the
local determination of fluids has ceased,
the tumours collapse, leaving as many
pendulous flaps, formed of the distended
cutis - a condition of the parts, which
could never be expected, if the disease
consisted of dilated veins.

The first stage of
this disease, then, is found to consist of



irritation or inflammation of the mucous
membranes of the intestine: followed by
an effusion of blood, between the mucous
and muscular coats. If this tumour be
rectly armed with a lancet, a clot of
blood, alone occupies the cyst. If the punc-
ture is small, blood again collects be-
neath the skin, and introduces the
tumour.

If the bowels be regulated,
and the inflammation subdued, which
is the cause of these productions; the
effused blood is regularly absorbed, and
no disordered shew appears here, and
periculis. On the contrary, if the
inflammation be permitted to continue,
coagulating lymph is thrown out so as to
fill the space previously occupied by the
effused blood. This in time becomes an

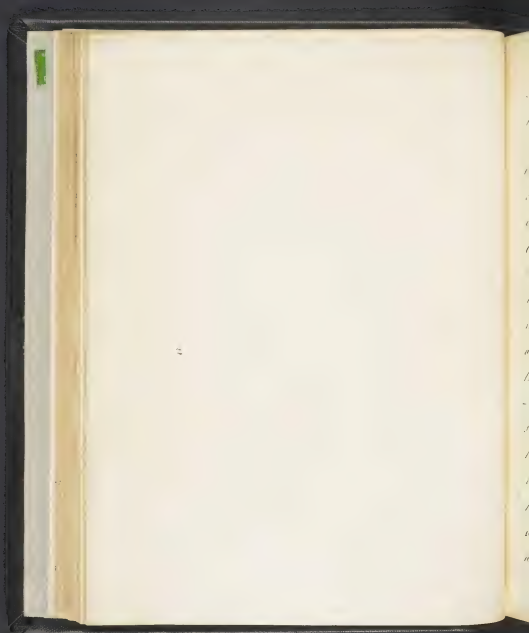


organised substance, forming, an external
 permanent pile. In a similar manner,
 blood is effused beneath the lining mem-
 brane of the bowel above the sphincter -
 and forms an internal pile. The blood
 thus effused, is sometimes absorbed, and
 the pile disappears; but more generally,
 it becomes an organised substance and
 increasing in bulk whilst others also form.
 They are productive of those inconveniences
 that have been represented. They are,
 however, less painful than when situa-
 ted externally. In the former case, the
 tumours are surrounded by soft and
 yielding substances, which do not make
 any painful pressure on them. When the
 pile is situated by the sphincter muscle
 the pain is exceedingly severe, and un-
 comfortably relieved, by pressing it upwards,

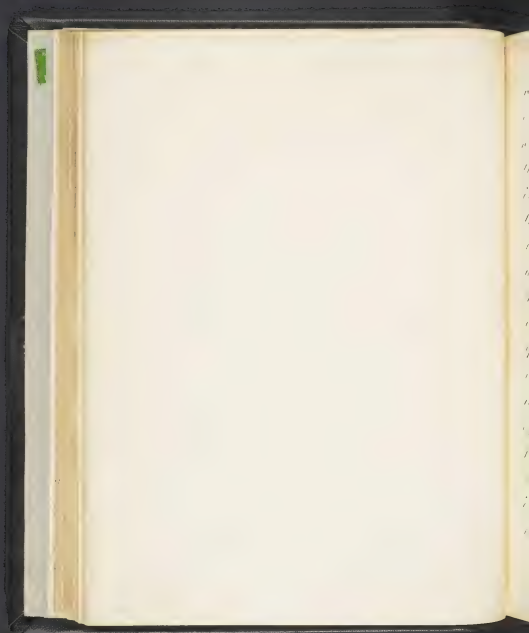
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the violence, of the symptoms, increase, until they resemble, in some degree, strangulated hernia. In some instances, the tumour is so completely strangulated by the forcible contraction of the irritated muscles, that it mortifies and sloughs, and thus, accomplishes a cure by a natural operation. When, however, this is the case, a contraction of the diameter of the intestines takes place, and if it be not relieved by a suitable regimen, the patient will labour under all the inconveniences and irritation, of a stricture of the rectum.

The inversion of the rectum, frequently attends this disease. This may be attributed, in part, to the efforts made to overcome the mechanical resistance, which these tumours oppose to the extrusion of the viscera. It arises, also, from an irrita-

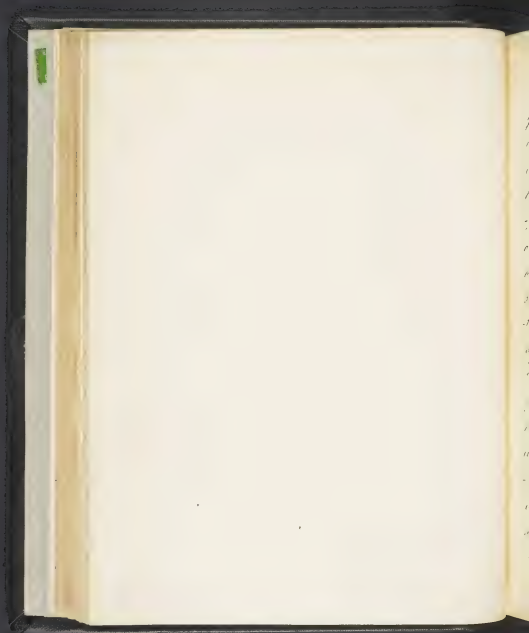


stirring action of the lancet, which
 produces a kind of inflammation; thus
 the lancet is the cause, often attended, in an
 inevitable action of the body, during the
 eruption of the virus. This form of the
 disease occurs, when the patient is laboring
 under some previous disorder of the
 system, and the convergent cut, to
 which the virus suffers great injury, in a
 number of hours. Each evacuation is
 attended, with similar consequences; and
 these patients, if not relieved, a consi-
 derable time, ignorant of the cause of their
 sufferings. To relieve this violent ob-
 struction, it is necessary to introduce the finger
 and repeat the operation, which manœuvre,
 the pain and inflammation are imme-
 diately removed. By repeating the same
 act when required, — by repeating the

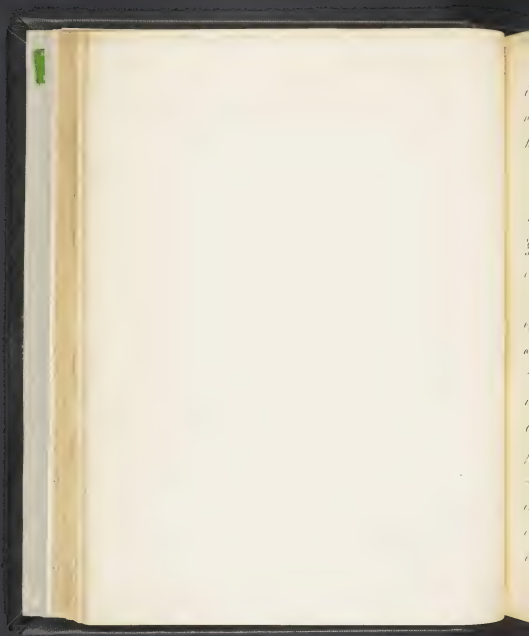


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diet, and by keeping the action of the
bowels in a healthy and open state, with
a mixture of castor oil, and mullage?
the patient has suffered no further
inconvenience, and in a short time,
the faulty action of the bowels returns
to its state. If this mode of relieving the
sufferings of the patient, be not adapted,
the folds of the bowels become irritated
and thickened, by the pressure of the
sphincter muscles. It now enlarges
and becomes, in form, adapted to this
unnatural situation; and thus, folds
of the bowels are often met with, forming
hemorrhoidal tumours. When these
tumours become inflamed and swelling,
it has a tendency, to draw down more
of the bowel and increase the disease.

It has, already, been suggested, that,



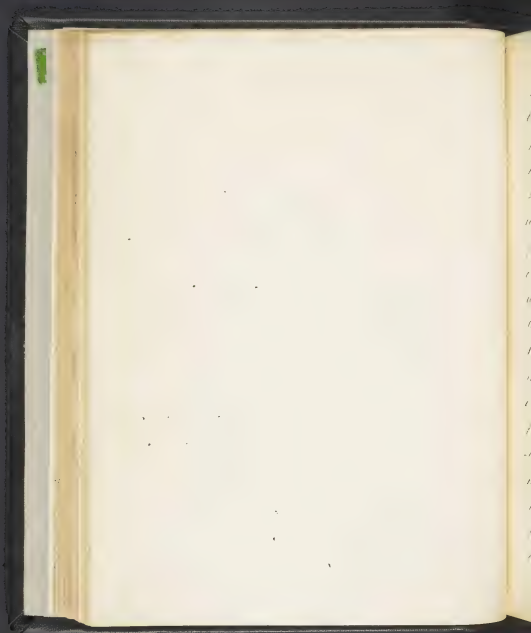
hemorrhoids appear to be the effect, of
general disorder of the alimentary canal;
and, that, the correction of the general
affection, is essential to the cure of the
local disease. This can be best accom-
plished by general bleeding, a blennor-
rhea (at least a suitable regulation) of the
diet, keeping the bowels in a salubre
state, by some mild aperient, - a horizon-
tal position and cold applications to the
affected part. From the known pro-
perties, which Balsam Copaiva is said, to
possess, in removing inflammation from
the mucous tissue; it has been prescribed
with advantage, in hemorrhoids. A reser-
vation should be preceded, by direct
depletion. As a sedative, the topical
application of Stramonium has been
found, useful. The Stramonium, made



into the consistent ointment, by the addition of Gourd seed extract, is said to be the best form, in which it can be used.

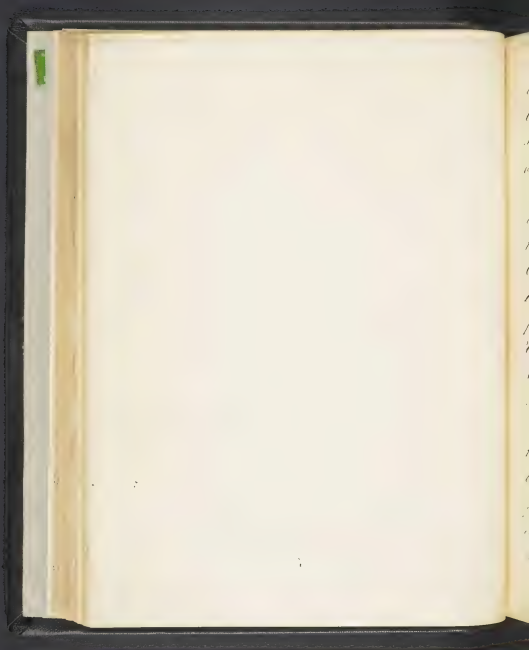
Wards paste has been found very beneficial. It is made as follows. Take of black Pepper and Cleampum, each, $\frac{3}{4}$ viii; (henne) seed $\frac{3}{4}$ xxii; Honey & Sugar each, $\frac{3}{4}$ li.

Care should always be taken, in case, of internal piles, to replace the tumours above the gripes of the sphincter. If the tumour be large and recent, it should be punctured, with a lancet, and its bloody contents discharged. The other piles is the least painful form of the disease, and when the discharge ^{is moderate} little care is required of the patient, except, to avoid, except in his exercise and regimen. But if it be profuse and debilitating, it is



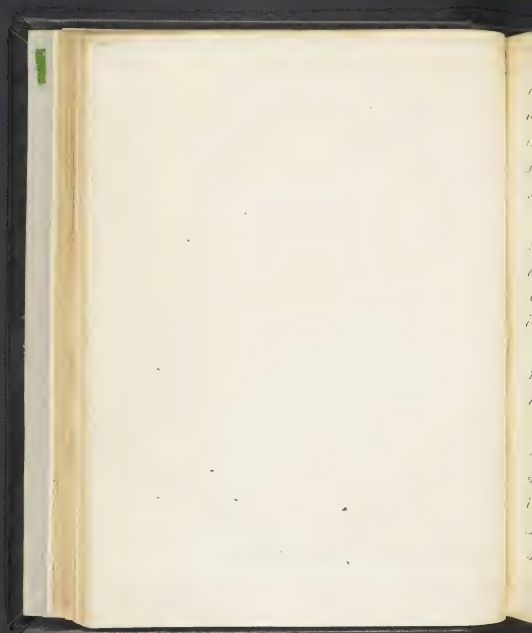
necessary to adopt such means as are
best calculated to arrest it. For this pur-
pose, the patient is directed to lie on a
mattress, to be kept cool, to be placed upon
a strict diet and acidulated drinks, and
when the system is lethargic to be bled
from the arm. Cold and astringent applica-
tions should be made to the cranium
and abdomen. Cold astringent injections
should be thrown into the medium.

Should it still continue to flow, search
should be made for the point, from which
it issues. If it flow from a projecting
point or tumour; it should be immediately
amputated, which it is said, will in
most instances, arrest the hemorrhage.
After all, should it still, continue to
flow; it will be necessary, to introduce
some proper change, for the purpose of



exciting profuse on the bleeding vessels.
Under such circumstances, the French
Surgeons rely, almost, exclusively, on the
application of the actual cautery.

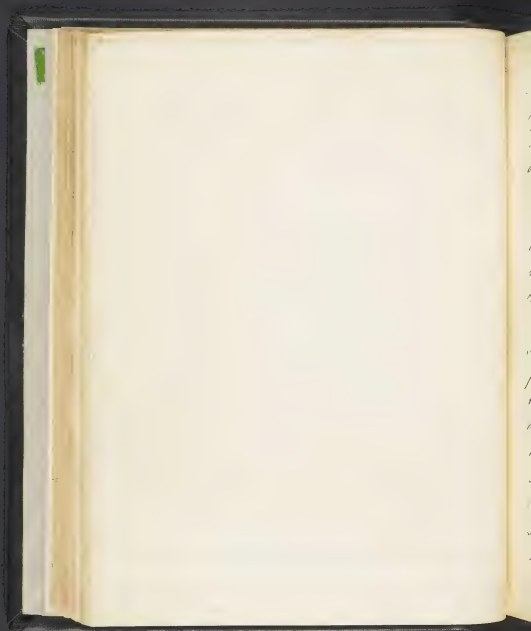
The sudden suppression of an habitu-
al haemorrhoidal flux, will give rise
to other alarming diseases, such as Epilepsy,
Cough &c. When this occurs, we must
endeavour by all possible means, to
produce a revulsion to the rectum.
Warm stimulating fluids should
be injected, and the patient should
sit over the steam of hot water. If
these means fail, leeches should
then be applied around the anus;
or recourse may be had to electricity
for the same purpose. The latter
method is strongly recommended by
Despault, who states, that he has



derived great advantage from it ~~from~~
it both for himself and others. By
re-establishing this discharge the di-
sease is relieved which arose from its
suppression.

In some cases of blind pitis, the
tumours increase to such magnitudes,
as to oppose every effort made, to dis-
charge the faeces. When, this is the case,
it is necessary to resort to some operation.

The ligature, excision, caustic, and
the actual cautery, are all used by differ-
ent surgeons, for removing these tumours.
To the ligature objections are made, as
being, not only, ineffectual, but danger-
ous. Petit has related a case in which,
it proved fatal. Its application is
said, to have produced symptoms,
similar to those, occasioned by strangu-



lated hernia; - pain and tenderness of the abdomen; nausea and vomiting; sometimes combined with retentions of urine; convulsions and even tetanus. Boyer, Cooper, Dupuytren &c have each, witnessed, so many instances, of the ill effects of ligatures, that they have, all adopted in its stead, the operation of excision.

Caustics, have been employed by surgeons, at different periods, for the purpose of destroying hemorrhoidal tumours. They have the inconvenience of extending their action much beyond the point of application. Besides, it is slow in its operation, and generally gives rise, to more or less inflammation, of the surrounding parts. They have entirely been renounced by most surgeons.

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The actual cautery was an operation, chiefly, relied on, by the ancients, for the removal of hemorrhoidal tumours. But, as this method was found, exceedingly painful, and was followed by symptoms of an unmanageable and distressing character, it also has been rejected.

Excision is at present, considered, the safest, most prompt, most effectual and least painful method, of removing these tumours.

Previously to undertaking the operation, it is proper, that the digestive organs should be restored to health, and that, the bowels acquire, the habit of daily and regularly, evacuating, the refuse matter of the food. The bowels ought to be, perfectly empty, before the operation. The bowels being vested to the

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almost, by the efforts made in evacuating,
the tumor; and the parts cleansed; by bath-
ing ⁱⁿ cold water: the pile should be seized
by a double hook, and when drawn up-
wards from the bowel it may be removed
by a hair of seissors.

The hemorrhoidal tumours being
removed; the wounds should be suffered
to bleed, as long as they are disposed to do
so; and afterwards, the parts should be
completely replaced, by means of the
finger, & circumscribed.

The patient should now be placed
in a horizontal position: The water should
be exposed, and the parts surrounding
the anus should be bathed in cold water,
in order, to prevent inflammation.

Diminishing the temperature of parts,
is one of the most potent means in our power

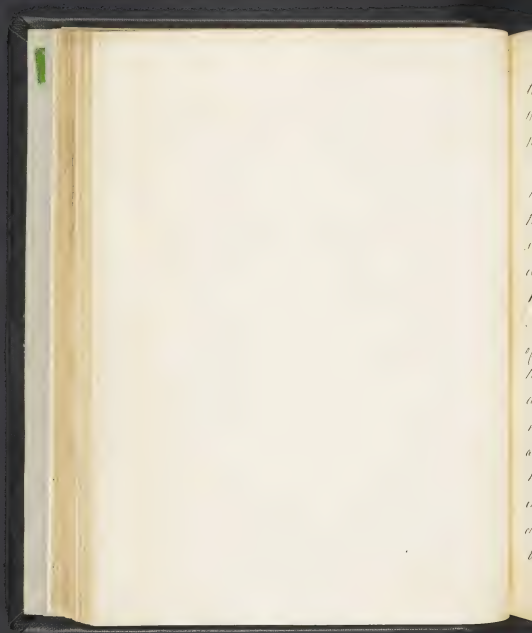
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ion of lessening, inflammatory action; and this seems to be best accomplished by the continual evaporation, which is going on when parts are frequently wetted.

Thus after treatment of a patient, who has submitted to an operation of this kind, consists, in keeping the parts as long undisturbed as possible:—confining him to a strict diet, and of such quality as is likely to leave least residue. If the opening medicine, which had been prescribed, with a view to clean the bowels before the operation, should be disposed to offend them afterwards, some opium may be given to prevent it.

With these precautions patients may not have an evacuation, for five or six days. Abernethy states, that he has known them to remain ten days without



turbed under such circumstances. During this time, the wound nearly heals and the health of the parts restored.

As this disease is frequently connected, however, with a disordered state of the digestive organs; sensations requiring some alvine discharges, for their relief, will require us to give something for this purpose, long before that period. A little castor oil with an injection of tepid water, with a view to dissolve the hardened faeces, will procure a discharge more easily, than any other means. The patient should not attempt to evacuate the contents of his bowels till his sensations become urgent. Any part, that may have descended, during the discharge, should be replaced. A small dose of Laud-



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num may be given, to stop any
further effect from the fungative
medicine.

— **Finis** —

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